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| Check the box next to the <u>best</u> description of your cause of action. Choose only one: | of FILED BILLINGS DIV. | |
|---|--|--|
| Prisoner Civil Rights Non-Prisoner Civil Rights Personal Injury/Tort Tax Collection Practices Employment Discrimination Other (specify) | | 2009 JUN 11 RM 8 33 PATRICK E. DUFRY, CLERK BY DEPUTY CLERK |
| FOR T | NITED STATES DIST THE DISTRICT OF M | RICT COURT ONTANA |
| Donald Kenth Feng | this blank. See Instruction 6.) | Cause No. W-09-70. Buch. Reformed be filled in by Clerk of Court) |
| (Enter above the full name of each plaintiff, incommuner, if any.) Plaintiffs, | cluding prisoner | |
| Vs. The Un Lef 5 La Les Diss Tack D. Shandtrum, Par Duffy Rose Me Ancher above the full name of each defendant.) | brut Coznit, toxck E. | COMPLAINT Jury Trial Demanded Jury Trial Not Demanded |
| Defendants. | | |
| | INSTRUCTIONS | |
| 1. Use this form to file a civil complaint with the additional pages where necessary. | he United States District Court | for the District of Montana. You may attach |
| 2. Your complaint must include only counts/ca | auses of action and facts - not l | egal arguments or citations. |
| 11" paper (letter size). Each plaintiff must sign | n the complaint (see page 6). T | ther papers submitted for filing must be on 8 ½" x he signatures need not be notarized. However, or copies of your complaint or other court records, |
| | | on April 10, 2006, the filing fee for a complaint is rt. In addition, you will be required to pay the cost |
| Plaintiff's Last Name FBN WA EOF | . | Complaint Page 1 of 6 |

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of serving the complaint on each of the defendants. If you are unable to prepay the entire filing fee and service costs for this action, you may move to proceed in forma pauperis. Your complaint will be returned to you without filing if it is not accompanied by either the full filing fee or a motion to proceed in forma pauperis. Please note that prisoners proceeding in forma pauperis are required to pay the full filing fee in installments.

- 5. Complaints submitted by persons proceeding in forma pauperis and complaints submitted by prisoners suing a governmental entity or employee are reviewed by the Court before the defendants are required to answer. See 28 U.S.C. §§ 1915(e)(2), 1915A(a); 42 U.S.C. § 1997e(c). After the Court completes the review process, you will receive an Order explaining the findings and any further action you may or must take. The review process may take a few months; each case receives the judge's individual attention.
- 6. The case caption (page 1 of this form) must indicate the proper Division for filing. A Division where the alleged wrong(s) occurred is a proper Division. When you have completed your complaint, mail the *original* of your complaint and either the full filing fee or your motion to proceed in forma pauperis to the proper Division:

Billings Division: Clerk of U.S. District Court, 316 N. 26th, Room 5405, Billings, MT 59101

(Big Horn, Carbon, Carter, Custer, Dawson, Fallon, Garfield, Golden Valley, McCone, Musselshell, Park, Petroleum, Powder River, Prairie, Richland, Rosebud, Stillwater, Sweetgrass, Treasure, Wheatland, Wibaux or Yellowstone County)

Butte Division: Clerk of U.S. District Court, 400 N. Main St., Federal Bldg. Rm. 303, Butte, MT 59701 (Beaverhead, Deer Lodge, Gallatin, Madison, or Silver Bow County)

Great Falls Division: Clerk of U.S. District Court, 215 1st Ave. North, P.O. Box 2186, Great Falls, MT 59403 (Blaine, Cascade, Chouteau, Daniels, Fergus, Glacier, Hill, Judith Basin, Liberty, Phillips, Pondera, Roosevelt, Sheridan, Teton, Toole, or Valley County)

Helena Division: Clerk of U.S. District Court, Paul G. Hatfield Courthouse, 901 Front St., Ste 2100, Helena, MT 59626 (Broadwater, Jefferson, Lewis & Clark, Meagher, or Powell County)

Missoula Division: Clerk of the U.S. District Court, 201 E. Broadway, P.O. Box 8537, Missoula, MT 59807 (Flathead, Granite, Lake, Lincoln, Mineral, Missoula, Ravalli, or Sanders County)

COMPLAINT

| I. PLACE OF CONFINEMENT: | |
|---|--------------|
| A. Are you incarcerated? Yes. ✓ No ☐ (if No, go to Part II) | , |
| B. If yes, where are you currently incarcerated? Carbon Courtey & Kellow 3 | Home County |
| C. If any of the incidents giving rise to your complaint occurred in a different facility, list that facility | / : |
| | |
| | |
| II. EXHAUSTION OF ADMINISTRATIVE REMEDIES | |
| A. Non-Prisoners | |
| 1. Does any cause of action alleged in this complaint require you to exhaust administrative remedies before filing in court? Yes ₩ No □ | |
| · | Don't Know □ |
| | |
| (BOLLIC) | Complaint |
| Plaintiff's Last Name FER W SOW | Page 2 of 6 |

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| 2. If yes, have you exhausted your administrative remedies? | Yes ₩ No □ |
|--|---|
| B. Prisoners (If you listed other institutions in I.C above, please an | swer for each institution). |
| 1. Is there a grievance procedure in your current institution? | Yes No □ |
| Did you file an administrative grievance based upon the same facts which form the basis of this lawsuit? | Yes No □ |
| 3. If you did not file an administrative grievance, explain why: | |
| | |
| III. PARTIES TO CURRENT LAWSUIT DONald | Keith tenuson |
| A. Name of Plaintiff | Marie Co |
| Mailing Address 292 Lower Riser | Roud, Fromber Max Jona 590 |
| (Please use additional sheets of paper to provide the n | ames and addresses of any additional plaintiffs.) |
| B. Defendant The Un Les States Dot | met Coser t is employed as |
| Distruct Court at Rell | ms Diwsran |
| | tion/Organization) |
| Defendant Tock D. Than 5trum | is employed as |
| Finds & at Bu | line Diwsin. |
| | tion/Organization) is employed as |
| Court Clark at Bill | 1115 DI ME107 |
| (Position and Title, if any) (Institut | tion/Organization) |
| Defendant Ryan Mr. Anchor | is employed as |
| Position and Title, if any) at Kill | tion Organization) |
| Defendant | is employed as |
| (Position and Title, if any) at (Institution) | tion/Organization) |
| (Please use additional sheets of paper to provide the sa | me information about any additional defendants.) |
| | into matter about any additional defendance. |
| IV. STATEMENT OF CLAIMS | |

A. Count I (State your cause of action, e.g., violation of civil rights):

Plaintiff's Last Name DER WY SOW

Complaint
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| 1. Supporting Facts (State, as briefly as possible, the facts of your case, including specific dates and locations. | Do |
|---|------------------------------------|
| not give any legal arguments or cite cases or statutes.): 30e Attached exhibits | |
| | - |
| | _ |
| | _ |
| | _ |
| | _ |
| | _ |
| 2. Defendants Involved (List the name of each defendant you intend to name in this claim. Specifically describe | - a how |
| each defendant is personally involved and what they did or did not do): | |
| se attacked exhibits | _ |
| | _ |
| | _ |
| | _ |
| | _ |
| | _ |
| If you have additional counts/causes of action, attach extra sheets. Set forth two paragraphs for each count, one Supporting Facts (following the directions under IV.A(1)), and one consisting of Defendants Involved (following under IV.A(2)). | consisting of ng the directions |
| V. INJURY | |
| How have you been injured by the actions of the defendant(s)? You must state as specifically as possible the actions of each individual defendant: | tual injury you |
| See attacked exp. p. 75 | _ |
| | - |
| | - |
| Plaintiff's Last Name FREGUSSA I | Complair Page 4 of 6 |

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| VI. RELIEF | |
|---|---------------------------------|
| State briefly and precisely what you want the Court to do for you. Make no legal arguments. Cited See a Hackel exhibits | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| VII. PLAINTIFF'S DECLARATION | |
| A. I understand that I must keep the Court informed of my current mailing address and that my fai dismissal of this Complaint without actual notice to me. | lure to do so may result in |
| B. I declare under penalty of perjury that I am the plaintiff in the above action, that I have read the information I have set forth within it is true and correct. 28 U.S.C. § 1746; 18 U.S.C. § 1621. | e above complaint, and that the |
| C. (Prisoners Only) This Complaint was deposited in the prison system for legal mail, postage pro | epaid or paid by the prison, on |
| | . 20 |
| Executed aton(Date) | , <u></u> - |
| Plaintiff's Last Name BROW SOW | Complaint Page 5 of 6 |

Case 1:09-cv-00070-RFC-CSO Document 1 Filed 06/11/09 Page 6 of 6 (If there is more than one Plaintiff, each Plaintiff must sign the complaint using a separate declarations page). Rev'd March 2006

Plaintiff's Last Name <u>FBR GWFTM</u>

Complaint
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